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From: JENS C. JENKINS
Serial No. 09/779,869
Comments: Please see attached.
Docket No.: 14531.79
Customer No. 047973

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Received 11 pages
out of 18
P.11 cut off

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PATENT APPLICATION

Docket: 14531.79

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of

Steven M. Horowitz, et al.

Serial No.:

09/779,869

) Art Unit

) 2614

Filed:

February 8, 2001

Confirmation No.:

6689

For:

BACKGROUND ENABLED RECORDING IN A
SET TOP BOX

Examiner:

Michael R. Shannon

Customer No.

047973

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Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Sir:

I hereby certify that this paper is being transmitted via facsimile at facsimile number 801-328-1707 to the Patent and Trademark Office to phone no. 571-273-8300 (Formal Fax No.) on the date shown below.

- Transmittal Letter (1 page)
- Amendment "C" (13 pages)
- Request for Continued Examination (1 page)
- Credit Card Form PTO-2038 in the amount of \$790.00

Dated this 26 day of October, 2005.

Respectfully submitted,




JENS C. JENKINS

Attorney for Applicant

Registration No. 44,803

Customer No. 047973

PPA0000001461 V001

AMENDMENT TRANSMITTAL LETTER (Large Entity)					Docket No. 14531.79	
Applicant(s): Steven M. Horowitz, et al.						
Application No. 09/779,869	Filing Date February 8, 2001	Examiner Michael R. Shannon	Customer No. 047973	Group Art Unit 2614	Confirmation No. 6689	
Invention: BACKGROUND ENABLED RECORDING IN A SET TOP BOX						
<u>COMMISSIONER FOR PATENTS:</u>						
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.						
CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	10 -	21 =	0	x \$50.00	\$0.00	
INDEP. CLAIMS	3 -	3 =	0	x \$200.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00	
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 23-3178 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card, Form PTO-2038. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.						
 Signature			Dated: October 26, 2005			
JENS C. JENKINS Attorney for Applicant Registration No. 44,803 Customer No. 047973			I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____ (Date) _____ Signature of Person Mailing Correspondence _____ Typed or Printed Name of Person Mailing Correspondence			
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OCT 26 2005

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PATENT APPLICATION
Docket No. 14531.79

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of

Steven M. Horowitz et al.

Serial No.

09/779,869

) Art Unit
) 2614

Filed:

February 8, 2001

Confirmation:

6689

For:

BACKGROUND ENABLED RECORDING
IN A SET TOP BOX

Examiner:

Michael R. Shannon

Customer No.

047973

AMENDMENT "C" AFTER FINAL AND RCECommissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action of September 21, 2005, please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 8 of this paper.